



Applicant(s)

:

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Michael C. Rice

For

TARGETED CHROMOSOMAL GENOMIC ALTERATIONS

WITH MODIFIED SINGLE STRANDED

OLIGONUCLEOTIDES

EXPRESS MAIL CERTIFICATION

"Express Mail" mailing label number <u>EI124983108</u>.

Date of Deposit March 27, 2001

I hereby certify that this transmittal letter and the other papers and fees identified in this transmittal letter as being transmitted herewith are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and are addressed to the Hon. Commissioner for Patents, Washington, D.C. 20231.

Hon. Commissioner for Patents Washington, D.C. 20231

TRANSMITTAL LETTER FOR ORIGINAL PATENT APPLICATION

Sir:

Transmitted herewith for filing are the [X] specification; [X] claims; [X] abstract; [X] declaration; [X] power of attorney, for the above-identified patent application.

Also transmitted herewith are:

[X] 12_ sheets of:

- [] Formal drawings.
- [X] Informal drawings. Formal drawings will be filed during the pendency of this application.

1040 U.S. PTO 09/818875

| [] | Certified copy(ies) of application(s) | | | | | | | |
|---------------------------------|--|--|--------------|---------|--|--|--|--|
| | | (country) | (appln. no.) | (filed) | | | | |
| | | (country) | (appln. no.) | (filed) | | | | |
| | | (country) | (appln. no.) | (filed) | | | | |
| from which priority is claimed. | | | | | | | | |
| [] |] An assignment of the invention to | | | | | | | |
| | [] A check in the amount of \$40.00 to cover the recording fee. | | | | | | | |
| | | | | | | | | |
| | [] | [] Please charge \$40.00 to Deposit Account No. 06-1075 in payment of the recording fee. A duplicate copy of this transmittal letter is transmitted herewith. | | | | | | |
| [] | An associate power of attorney. | | | | | | | |
| [X] | Smal | Small Entity Status is Respectfully Requested. | | | | | | |
| | The filing fee has been calculated as shown below: | | | | | | | |

| FOR | NUMBER FILED | | NUMBER EXTRA | RATE | FEE |
|-----------------------|-----------------|--------|-----------------|-----------|----------|
| BASIC FEE | | | | | \$355.00 |
| TOTAL CLAIMS | 28 | - 20 | = 8 | X \$ 9 = | \$ 72.00 |
| INDEPENDENT CLAIMS | 1 | - 3 | = 0 | x \$ 40 = | \$ 0.00 |
| [X] MULTIPLE | DEPENDENT | CLAIMS | | + \$135 = | \$135.00 |
| | | | | TOTAL | \$562.00 |

- [X] A check in the amount of \$562.00 in payment of the filing fee is transmitted herewith.
- [] This application is being filed unaccompanied by a filing fee. The appropriate filing fee will be paid in response to a Notice to File Missing Parts, pursuant to 37 C.F.R. § 1.53(f).
- [X] The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

| line the | e specification by inserting be sentence: This is a [] con | tinuation-in- |
|----------|---|---------------|
| part, of | application Serial No.: | , filed |
| entitled | | |
| | | |

[] Please charge \$_____ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

Hope Uiebke (Reg. No. 35,588) Attorney for Applicants

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